

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Hiroyuki HIDAKA

Serial No. 10/538,263

Confirmation No.: 2260

Filed: June 8, 2005

For: Wireless Communication Terminal And Handoff
Judgment MethodMail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450Art Unit: 2617
Examiner: Holliday, Jaime Michele

I hereby certify that this correspondence is being transmitted via electronic filing on the date indicated below to:	
Commissioner for Patents	
P.O. Box 1450	
Alexandria, VA 22313-1450, on	
<u>October 31, 2006</u>	
Date of Deposit	
Juanita Soberanis	
Name	<u>Juanita Soberanis</u>
Signature	<u>Juanita Soberanis</u>
Date 10/31/2006	

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

 No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	20	-20	20	0	LG=\$50 SM=\$25	\$ 0
INDEPENDENT CLAIMS FEE	4	-3	4	*	LG=\$200 SM=\$100	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$380 SMALL ENTITY FEE = \$180	\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)				\$250 FOR EACH ADDITIONAL 50 SHEETS		\$ 0
Independent Claims 1, 5, 9 and 12					TOTAL	\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

Please charge the fee of \$0- for the additional claim fees to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

Please charge the fee of \$0- for the extension of time to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.

By:



Troy M. Schueler
Registration No. 36,667
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Date: October 31, 2006

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INDEPENDENT CLAIMS FEE	4	-3	4	*	LG=\$200 SM=\$100	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS						
					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180	\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)				\$250 FOR EACH ADDITIONAL 50 SHEETS		\$ 0
Independent Claims 1, 5, 9 and 12					TOTAL	\$ 0

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Respectfully submitted,
HOGAN & HARTSON L.L.P.By: Troy M. Schmelzer
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Attorney for Applicant(s)

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